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Walden University

College of Social and Behavioral Sciences

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Seth Garcia

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Walden University
2020

Abstract

Individual Experiences of Criminogenic Youth Participating in Outpatient Treatment

by

Seth Allen Garcia

MA, The Chicago School of Professional Psychology, 2010

BS, The University of Akron, 2004

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Forensic Psychology

Walden University

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Abstract

Outpatient treatment programs for low-level criminogenic youth have been shown to positively impact behavioral trends and recidivism rates. By providing juvenile offenders the opportunity to remain in the community while receiving clinical interventions to address their maladaptive behaviors, outpatient therapy enables participating youth to identify their negative decision patterns. The purpose of this phenomenological study was to examine the individual experience of low-level criminogenic youth who successfully completed outpatient treatment. Bandura's self-efficacy theory was used to frame the study, and audio recordings were collected during semistructured interviews with 8 participants. Subsequently, the recordings were transcribed and the data were coded to identify emerging themes concerning individual experiences and corresponding behavioral patterns, which included the following: Outpatient treatment aided in decreasing recidivism and improving personal decision patterns, involvement in outpatient treatment aided in decreasing substance use among participants, and outpatient treatment helped establish improved behavioral patterns after the program was completed. The themes that offered insight into the individual experiences of the participants included improved self-efficacy through active participation and engagement in outpatient treatment, overall positive experience throughout outpatient therapy, and improved life trajectory due to involvement in outpatient treatment. These results may provide insight to current outpatient treatment programs to improve their design and clinical approach in order to continuing addressing ongoing issues associated with criminogenic youth within communities.

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Chapter 1: Introduction to the Study

Decreasing recidivism within the juvenile justice system is a goal shared by all facets of society. Whether criminogenic youth have committed minor offenses or serious felonies, identifying their maladaptive behavioral traits and addressing them through comprehensive clinical therapy can represent an effective alternative to incarceration (Kretschmar, Butcher, Flannery, & Singer, 2016). In addition, a majority of juvenile offenders report consistent substance abuse issues while involved with the juvenile justice system, which can negatively affect their interactions within the courts and prolonging their overall time in the system (Tripodi & Bender, 2011). This typically results in increased legal sanctions and social stigma, which may affect clients for years after initial legal charges are incurred (Hodges, Martin, Smith, & Cooper, 2011). In this study, the term *criminogenic youth* refers to juveniles who have become involved with the legal system due to maladaptive individual decision patterns and negative behavioral traits (Papp et al., 2016). Such adverse decisions, behaviors, and/or traits resulted in the youth being formally charged as first-time offenders, receiving a misdemeanor indictment, or both.

Problem Statement

Although it is known that outpatient therapy positively influences a youth's ability to decrease substance use (Demb et al., 2012) and that low-level criminogenic youth respond well to community-based treatment interventions (DeFosset et al., 2017), there are academic areas still lacking in vital content. Missing from the current literature is an understanding of how criminogenic youth experience outpatient treatment. There is

a need to identify whether positive personal experiences in outpatient therapy affect participants' self-efficacy. The hope is that these positive experiences might work to increase self-efficacy, enabling participants to avoid criminogenic behaviors and achieve decreased recidivism rates through improvements in their personal perspective and decision making. This study built on research by Kretschmar et al. (2016), who highlighted the importance of outpatient therapy for low-level criminogenic youth. Kretschmar et al. encouraged additional researchers to focus their efforts on community-based therapeutic interventions in order to facilitate positive social change within their communities. In the current study, I proceeded from that premise, incorporating the importance of improved self-efficacy among criminogenic youth in order to decrease their criminal behaviors and recidivistic trends.

Purpose of the Study

The purpose of this qualitative study was to identify the impact of the individual experience of outpatient treatment on criminogenic youth struggling with substance addiction. Identifying alternative intervention methods for this demographic is necessary to decrease recidivism rates and the overall costs associated with criminal detention and residential treatment facilities (Smith & Blackburn, 2011). By focusing on youth's level of self-efficacy throughout treatment, I sought to identify how personal motivation and individual participation affected clinical progress and recidivism trends among the participants.

Significance of the Study

A number of studies have focused on the benefits of outpatient therapy in relation to juveniles struggling with substance addiction (DeFosset et al., 2017; Dembo et al., 2012; Kretschmar et al., 2016). However, information on the element of criminality and decreasing recidivism is lacking in the available literature on criminogenic trends within the juvenile population. This study focused on youth who were struggling with a substance use disorder and were involved in the legal system. Their experiences in outpatient treatment were addressed, as well as how those experiences enabled them to avoid recidivating. The results of this study may aid policymakers in the surrounding communities in identifying potential alternatives to residential placement and incarceration, which are extremely costly methods of addressing criminogenic trends among the juvenile population. It may provide the courts with a viable clinical option for low-level youth entering the system that addresses their criminogenic behaviors and substance use disorders while allowing them to remain in the community. Such an approach might decrease the number of youth placed into detention facilities and reinforce the importance of rehabilitation over incarceration among participating juveniles.

Background

Juvenile substance addiction directly affects behavioral trends and criminal recidivism (Smith & Blackburn, 2011). The U.S. Department of Justice reported that 77% of criminogenic youth identified a substance abuse issue within 6 months of their involvement with criminal courts (DeFosset et al., 2017). Recent studies have shown the

potential impact of community-based treatment interventions to address this rising issue. One study identified the positive impact of increasing self-efficacy through treatment-based personal challenges as an effective manner of decreasing recidivism trends and academic regression among participating youth (Seroczynski, Evans, Jobst, Horvath, & Carozza, 2016) Another focused on community-based treatment interventions and how those efforts had positive impacts on the participating juveniles' ability to achieve sustained sobriety (Tripodi & Bender, 2011).

According to DeFosset et al. (2017), low-level criminogenic youth participating in a community-based outpatient treatment program tended to feel more involved and engaged in the therapeutic process, with this feeling aiding in their level of participation in the program as well as their potential for long-term success within the community. In addition, studies by Kretschmar et al. (2016) and Dembo et al. (2012) indicated that community-based diversion programs can positively impact criminogenic youth's psychological functioning, substance abuse trends, and recidivism rates. While the potential impact of outpatient therapy for criminogenic youth has been identified, the referenced studies indicate that "additional work is needed to understand if, how, and under what circumstances disparate perspectives may be combined to improve youth outcomes" (Defosset et al., 2017, p. 428).

Framework

After reviewing a number of available theoretical approaches, I chose to apply Bandura's self-efficacy theory as the theoretical perspective for this study. This approach works to identify the impact of personal experience on therapeutic growth and the

importance of reinforcing an individual's sense of accomplishment through personal challenges and clinical guidance (Bandura, 1997). By working to establish or encourage participants' internal motivation, it is possible to have a positive effect on their criminogenic behaviors and addictive impulses, decreasing their recidivistic trends and addictive behaviors (Bandura, 1997). The outpatient treatment provided to the youth in this study highlighted the importance of personal responsibility and accountability in relation to therapeutic growth and clinical progress, falling right in line with the tenets of self-efficacy theory.

Research Questions

For the purpose of this study, *outpatient therapy* was defined as non-intensive outpatient treatment. This therapeutic approach incorporates a variety of clinical interventions for the involved youth, including individual counseling, community case management, substance abuse education, and urinalysis. In this study, I primarily sought to identify the individual experiences of the participating youth to ascertain whether their involvement in outpatient therapy aided in decreasing rates of recidivism. Additionally, the outpatient treatment program incorporated in this study emphasized improved self-efficacy. The manner in which this theoretical approach influenced the essence of the criminogenic youth's experience in treatment was the second area of focus.

RQ1. What is the lived experience of criminogenic youth participating in outpatient therapy?

RQ2. How do criminogenic juveniles who successfully completed outpatient therapy describe how it affected their subsequent behaviors?

Nature of the Study

I conducted this study using a qualitative methodology, in the phenomenological tradition. This approach focused on descriptions of what the criminogenic youth experienced while in outpatient treatment and what influenced those personal experiences in therapy. This combination enabled the study to draw on the participants' individual experiences through interview-based data collection due to its ability to elicit unique and individual perspectives (Skea, 2016). The idea of focusing on how the participants processed their lived experiences throughout the course of therapy provided a distinctive method of conveying the importance of outpatient therapy as a pertinent tool toward criminogenic diversion (Skea, 2016). Additionally, by encouraging the participants to convey their lived experiences, it was possible to identify the manner in which self-efficacy affected their treatment experience, as well as the role their internal locus of control played in decreasing their criminogenic behaviors and recidivistic trends (Charles-Walsh, Upton, & Hester, 2016). All participants had engaged in outpatient therapy as youth but were 18 years of age or older when participating in the diagnostic interviewing process. This made it possible for the research to incorporate participants' individual lived experience and criminogenic trends after participating in the therapeutic process.

Possible Types and Sources of Data

I used a qualitative approach for this study, focusing on phenomenological research in order to address the participating youth's personal experience throughout the process. (Skea, 2016). By functioning as a complete observer, I was able to attain

information through strict observation without participating in the clinical components of the study. The interviews were conducted face-to-face and in person in order to elicit as much pertinent information as possible while also monitoring nonverbal cues (Patton, 2015).

Possible Analytical Strategies

The data analysis strategy for each research question followed consecutive steps in order to prepare the information in a logical and sequential format. This process included reviewing all of the available data in order to understand the breadth and scope of gathered materials, preparing the data through necessary transcriptions and categorization, coding the data into applicable categories and themes, and creating narrative passages to describe the findings of the analysis (Patton, 2015).

Limitations and Challenges

While this study offered the potential to address the topic of criminogenic youth and provide increased insight into the minds of juvenile offenders, it also presented a number of limitations and challenges. Primarily, the demographic that this study focused on is considered a vulnerable population due to the age range (typically 13 to 17 years old) and previous involvement in the legal system. To circumvent potential roadblocks, all research participants were over the age of 18 and were out of the legal system when they were offered the opportunity to participate in the study. This was accomplished by incorporating participants who were within the typical age range at the time they were involved in the program but at least a year removed from completing the outpatient

program. Gender was considered fluid, and all gender identifications were viable for inclusion in the study, so no emphasis was placed on any one specific gender.

Considering the implications for theory, practice, and social change within this study draws the focus back to the identified purpose: identifying the impact of the individual experience of outpatient treatment on criminogenic youth struggling with substance addiction. I sought to identify whether Bandura's self-efficacy theory is an impactful and longstanding method of clinical intervention for low-level criminogenic youth. If so, the practical application of this theoretical approach might be pursued on a larger scale in order to positively impact those engaging in treatment. The social change implications of the study are twofold: decreasing recidivism rates among low-level criminogenic youth and identifying a more cost-effective manner of intervention available to the juvenile criminal courts.

While there was no guarantee that participants' experiences were positive or beneficial to their diagnosed substance use disorder, collecting individualized and personal experiences regarding their time in treatment was the primary goal of this study. The purpose was to identify whether outpatient treatment rooted on Bandura's self-efficacy theory is effective for criminogenic youth who have been diagnosed with a substance use disorder. It was hypothesized that this approach to outpatient therapy increases participants' personal level of self-efficacy, improving decision patterns and decreasing recidivism among the studied population. Regardless of outcome, it is my hope that in completing this dissertation, I have engaged individuals and conveyed their experiences in a safe and respectful manner.

Chapter 2: Literature Review

Within the United States, juvenile crime rates have decreased among differing regions over the past decade but continue to remain an issue within a variety of settings and communities. In particular, juvenile probation has become the workhorse of the entire juvenile justice system due to its frequent use as a means of supervision and potential deterrence of future offenses (U.S. Department of Justice, 2018). Due to the increased implementation of diversionary programs through the juvenile probation system, alternative methods of identifying problematic behaviors among low-level juvenile offender and treating those maladaptive behaviors have increased in popularity. This trend has resulted in an influx of outpatient treatment options focused on improved behavioral health among juvenile offenders within a variety of states (Stein, Homan, & DeBerard, 2015). A primary point of emphasis among a majority of these burgeoning community-based therapeutic options is addressing the varying levels of substance abuse and addiction displayed by low-level juveniles involved with the criminal justice system (Taylor, 2016).

There is a great deal of relevant information regarding juveniles who receive outpatient treatment for substance abuse within a variety of settings, as well as criminogenic juveniles who have struggled with a diagnosed substance use disorder. However, studies discussing the individual experiences of these criminogenic juvenile populations are sorely lacking in breadth and scope. Additionally, as noted in a number of the cited articles, there is a need to expand on the already available information in order to develop social applicability (Korchmaros, Thompson-Dyck, & Haring, 2017; Stein et

al., 2015). This literature review begins with a detailed look into prior research that has focused on outpatient substance abuse treatment for juvenile offenders. It continues by delving into the connection between criminogenic juveniles and varying levels of diagnosed substance use disorders that they experience throughout their time in the legal system. It concludes with a look into the methodology of phenomenology and how proven techniques were incorporated into the data-gathering portion of this dissertation.

Literature Search Strategy

After searching through a variety of available databases, including PsycARTICLES, PsycINFO, Sage Journals, and SocINDEX, I collected a number of relevant sources. These resources were then synthesized in order to identify suitable methodological approaches when dealing with juvenile populations and the effectiveness of outpatient therapeutic interventions provided to juvenile offenders. The following keywords were used in order to identify the most applicable resources for the current study: *outpatient + substance abuse treatment + juvenile offenders*, *juvenile offenders + substance addiction*, *phenomenological research + juvenile populations*, and *individual experiences + substance abuse treatment*. All of the included sources were drawn from studies that were reported in peer-reviewed academic journals published within the last 7 years.

Theoretical Foundation

The foundational purpose of understanding how a criminogenic juvenile personally experiences the process of outpatient therapy and substance abuse treatment is to help decrease problematic behavioral patterns, increase self-awareness, and aid in

achieving sustained sobriety. In the case of this study, it was of paramount importance to retrieve the individual experiences of low-level juvenile offenders who participated in diversionary services in order to identify both their personal experiences and the sense of accomplishment they achieved after completing outpatient treatment. Being able to effectively display improved behavioral tendencies, increased self-awareness, and decreased recidivism is instrumental to outpatient treatment and the reason that the juvenile justice system is expanding use of the diversionary approach (Sullivan, Blaire, Latessa, & Sullivan, 2014). To this end, Bandura's self-efficacy theory seemed the most appropriate approach to address these stated issues and effectively answer the identified research questions within this study.

Bandura's Self-Efficacy Theory

Self-efficacy theory, as proposed by Albert Bandura, is rooted in individuals' belief that their actions are impactful and can make a difference. When individuals believe that their actions are effective, specific things take place: They feel better about themselves, they develop a feeling of power or control over what happens in their lives, and they do not simply float hopelessly from one activity to another (Bandura, 1997). People with an established sense of self-efficacy act, think, and feel differently than people with no self-efficacious beliefs (Bandura, 2008). This is due to the motivation that people with self-efficacy experience, or their drive to perform, which is directly tied to what they believe to be true and what they imagine they can achieve. People with an established sense of self-efficacy genuinely believe that their feelings and actions have

influence over the outcome of any given situation (Begun, Bender, Brown, Barman-Adhikari, & Ferguson, 2016).

This perspective of facilitating increased self-efficacy and overall engagement among criminogenic youth was a foundational concept of the current study. In holding to Bandura's self-efficacy theory, incorporating the final method of increasing positive self-efficacy while acknowledging personal physiology is an intricate portion of the overall therapeutic approach with the participating juvenile offenders (Association for Psychological Science, 2013). While mastering experiences of personal achievement and receiving positive social direction are essential to the perpetuation of individual self-efficacy, understanding each participant's level of emotionality and working within that person's individual emotional constructs is essential to achieving sustained success (Bandura, 1997). In multiple studies, existing mental health issues and frequent comorbidity have been referenced as instigators and catalysis of initiated or increased substance abuse among criminogenic juveniles (Davis, Dumas, Wagner, & Merrin, 2016; Ketchmar et al., 2016). Being able to accurately identify those existing mental health symptoms and address them throughout the therapeutic process is vital to achieving any modicum of sustained success.

Bandura's self-efficacy theory represented a foundational element of the present study, in which I sought to address the question of whether outpatient treatment for criminogenic youth struggling with a diagnosed substance use disorder beneficially impacts participants. While a number of previous studies have shown the positive impact of outpatient treatment among juvenile participants (Begun et al., 2016; Davis et al.,

2016) and the prevalence of substance addiction among criminogenic juvenile populations (Kretchmar et al., 2016; Stein et al., 2015), information is lacking on the individual experiences of those juvenile participants and how they impacted recidivism and sustained sobriety. This study was focused on building upon the existing research by identifying the individual experiences of criminogenic juveniles who had engaged in outpatient therapy rooted in the theoretical perspective of Bandura's self-efficacy theory. The impact that their participation had on individual recidivism rates and sustained sobriety was the focal point of this dissertation. While the hypotheses aligned with prior studies and the success that outpatient treatment had shown among juvenile participants, this study proceeded with no preconceived notions. Instead, it functioned objectively and without bias in order to allow the participants' individual experiences and subsequent results to stand on their own merit.

Outpatient Substance Abuse Treatment for Juvenile Offenders

Over the past decade, clinical knowledge and social understanding have grown concerning outpatient therapy and its applicability to criminogenic populations. Due in large part to the opioid epidemic and how it has devastated a number of communities around the country, addressing substance use disorders earlier in life has become a common approach within the criminal justice system (Belenko et al., 2017). Within the legal system, there have been efforts to decrease reflexive incarceration for lower level offenders in favor of community-based treatment options aimed at genuine behavioral modification (Zarkin et al., 2015). These pioneering approaches to diversionary programs within the legal system have led to a number of promising outcomes, including decreased

recidivism among criminogenic juveniles (Charles-Walsh, Upton, & Hester, 2016), improved insight regarding criminogenic behavioral patterns among juvenile participants (Becan et al., 2015; van der Stouwe et al., 2016), greater understanding of the effectiveness of outpatient substance abuse treatment among juvenile offenders (Taylor, 2016), and projection of the economic benefits of decreasing incarceration in favor of community-based treatment interventions (Settumba, Chambers, Shanahan, Schofield, & Butler, 2017; Zarkin et al., 2015).

While the idea of diversion programs within the criminal justice system has existed since the 1990s, the enhanced clinical approach through specified theoretical interventions is a more recent concept (Tripodi & Bender, 2011). In the early 2000s, researchers began to identify the connection between criminogenic juveniles and addiction rates. As reported in a number of studies since that time, the prevalence of juvenile offenders struggling with a diagnosable substance use disorder has exploded. A recent report indicated that over 75% of youths involved with the criminal justice system admitted substance abuse within 6 months of their most recent arrest (National Institute on Drug Abuse, 2014). While these studies are not definitive in nature, they indicate an identifiable trend among juvenile offenders concerning their propensity to abuse illicit substances.

As this trend became apparent, those within the legal system began to see an opportunity to divert youth from detention placement and into community-based treatment intervention (Korchmaros, 2017). It was at this time that juvenile drug courts and outpatient treatment facilities began to take root around the country. From 2005 to

the present, multiple juvenile courts opted to incorporate diversion programs into their probation departments, with the goal of keeping low-level and first-time offenders within the community and out of detention facilities (Taylor, 2016). These community-based treatment programs offered juveniles the opportunity to receive clinical therapy and substance abuse education in place of simply sitting in a detention facility. While the details of these programs vary from state to state, with some incorporating family therapy and others including group treatment options, the tenets of the outpatient approach remain the same (Becan et al., 2015). These programs focus on holding criminogenic youth accountable for their maladaptive behaviors through clinical interventions while providing substance abuse therapy and behavioral modification (Kretschmar et al., 2016; Stein et al., 2015).

This community-based approach to addressing the social issue of juvenile criminal behaviors has expanded the potential for viable treatment interventions within multiple social settings. From court-mandated therapy to preemptive diversion programs, the applications for this approach to criminogenic juveniles have provided the courts with practical alternatives to incarceration. Additionally, the approach has shed light on the positive impact that outpatient treatment can have on both a macro and micro level (van der Stouwe, Asscher, Hoeve, van der Laan, & Stams, 2016). As outpatient treatment for low-level and first-time offenders has shown varying levels of effectivity within a variety of communities, the impact that it can have on participants' personal insight and decision making has also been displayed (Mauro, McCart, Sheidow, Naeger, & Letourneau, 2017).

Kretschmar et al. (2016) and Zarkin et al. (2015) conducted studies delving into the concept of motivation in regard to treatment participation and its correlation with outcome sustainability. They identified the positive effects that outpatient treatment can have on criminogenic youth, such as improved social connectivity and decreased substance use within the community. Additionally, participants who have displayed appropriate motivation toward their treatment engagement have shown the ability to improve problem-solving skills within a diversionary setting and outpatient therapy (van der Stouwe et al., 2016). Being able to build a bridge from positive social impact to positive individual impact reinforces the purpose of this study and the potential that outpatient treatment holds for sustainable social change.

In building off this concept, researchers in additional studies have gone even further by exploring both the individual level of engagement displayed by juvenile participants and the level of engagement displayed by their involved family members (Mauro et al., 2017). While participation and engagement by the involved youth have been demonstrated to increase their ability to approach and solve personal issues, systemic familial engagement has shown even more promise. Being able to establish higher levels of participation and involvement in youth and their parents or guardians has been shown to positively impact juvenile offenders' ability to abstain from substance use and avoid unforeseen probation violations (Mauro et al., 2017). From sustained levels of sobriety to reduced legal sanctions, these findings have further strengthened the individual and social potential that diversionary outpatient treatment has for improving

outcomes for participating youth and promoting overall positive social change (Kretschmar et al., 2016; Mauro et al., 2017).

This type of application far exceeds the projected expectations that were postulated when diversionary services were first introduced. At one point, the primary method of keeping juveniles out of detention facilities was to place them into manual labor programs and work camps (Atkinson, 1995). To this day, some agencies still employ an archaic manner of diversion, implementing manual labor in place of therapeutic interventions. However, the benefit that outpatient therapy rooted in proven theoretical application can have for participating youth continues to be evident. Recent studies focusing on an alternative population of maladaptive youth, those displaying excessive truancy and scholastic struggles, have shown a significant decrease in substance abuse when participants are engaged in outpatient therapy (Dembo et al., 2016). Dembo et al. (2016) found that youth who received a brief intervention, or outpatient therapy, had a lower rate of marijuana use following the completion of the program. This study built upon the idea of therapy over sanctions and continued bolstering the proposed effectivity of outpatient treatment for juveniles struggling with substance abuse (Dembo et al., 2016).

The individual and social benefits provided by outpatient therapy for criminogenic juveniles struggling with a substance use disorder have been shown within multiple social contexts. Building off that premise, it appears that the potential economic impact that programs of this nature can have on their surrounding communities is just as meaningful (Settumba et al., 2017). Recent economic evaluation studies of outpatient

treatment programs have looked at the numerous options available to individuals within the legal system in order to identify their sustainability and economic viability (Kuo, & Gase, 2017). The tremendous economic burdens associated with juvenile offenders include those related to policing the neighborhoods in which they reside, prosecuting their committed crimes, and rehabilitating their maladaptive behaviors while they are in the legal system (Davis et al., 2016). Approaching the problem proactively and diverting offenders into community-based treatment programs has shown to decrease overall costs while providing a more sustainable solution to existing behavioral health issues (Settumba et al., 2017). These studies have encouraged additional research in order to better identify the most effective method of clinical intervention, but the initial results indicate the potential economic benefits of outpatient therapy within varying communities (Davis et al., 2016).

While a number of studies have employed varying methods of data collection and research gathering, a majority have been able to establish some level of success correlated to outpatient treatment and diversion for criminogenic juveniles (DeFosset, Schooley, Abrams, Kuo, & Gase, 2017; Dembo et al., 2011; Kretschmar et al., 2016). Popular methods of data collection have included the use of randomized questionnaires, secondary data collection, formatted assessment tools, and individual interviews. Depending on the population and nature of the study, these approaches have been specifically formatted and implemented to best protect the participants while simultaneously collecting relevant data regarding the issue of interest (Kretschmar et al., 2016).

After conducting exhaustive research on the topic of outpatient substance abuse treatment for juvenile offenders, it was evident that no one methodological approach surpassed another (DeFosset et al., 2017; Dembo et al., 2011). While individual assessment and interviewing appeared more often than other approaches, the information that was attained within all of the studies included in this literature review provided tremendous insight and direction (Blair et al., 2016; Mauro et al., 2017). In fact, without the differing methodological approaches incorporated by the varying research studies the available information would have been significantly smaller and academically incomplete. Being able to incorporate such a wide and diverse data gathering tactic to a topic of this nature ensures that the information continues to expand and flourish, laying the foundation for future studies (Kretschmar et al., 2016).

Due to the phenomenological approach incorporated in this current study, this literature review focused on individual interviewing methods and the effectivity of that specific data gathering process. There are a number of limitations associated with individual interviewing such as smaller sample sizes, experience variations, and increased levels of subjectivity (Blair et al., 2016; Davis et al., 2016). However, the manner in which the process enhances the experiential component of data gathering creates a scenario in which individual interviewing provides a genuine look into the inner workings of the individual treatment experience (Belenko et al., 2017; Kretschmar et al., 2016; Taylor, 2016). This is an essential component when attempting to identify alternatives to incarcerations and the manner in which the juvenile offender is impacted by community-based interventions (Mauro et al., 2017).

How can we tell when individual interviewing is providing pertinent data regarding the impact of specific therapeutic interventions? Since the content associated with the individual interviewing process is inherently subjective, and the collection process is typically fluid, does that minimize the information associated with the data collection process? According to Bandura (1997), identifying the experiences of the individual is fundamental to comprehending the experiences of the masses. Therefore, taking the time to conduct smaller scale research studies focused on the individual participating, and how they were impacted by the experience, is foundational to furthering the potential for larger scale application (Begun et al., 2016). In addition, by focusing on underserved populations, or demographics of people who are vulnerable in nature, a number of socially beneficial objectives are also accomplished.

Academically, the information attained can be used to further specific knowledge points and expand future research efforts toward creating viable social change (Gordon, Kinlock, & Battjes, 2004). Clinically, those underserved populations receive increased focus and therapeutic interventions aimed at keeping them in the community as opposed to increased penal sanctions (Kretschmar et al., 2016). Economically, alternative community-based treatment options provide the juvenile courts with therapeutic recourse that not only decreases recidivism rates but also increases the juvenile offender's potential toward positive social contributions (Kapoor, Peterson-Badali, & Skilling, 2018). The potential to perpetuate positive social change within this specific demographic has been shown within a number of studies. Building upon those previous academics and furthering the available information through expanded individual focus was foundational

to this study. Conducting additional research on juvenile offenders participating in outpatient treatment was encouraged by a number of previous researchers (Blair et al., 2016; Belenko et al., 2017; DeFosset et al., 2017; Mauro et al., 2017). Incorporating the individual experiences of criminogenic youth engaged in treatment rooted in self-efficacy theory is the gap in the literature that this study aims to address.

Criminogenic Juveniles With Diagnosed Substance Use Disorders

The percentage of juvenile offenders struggling with a diagnosed substance use disorder is staggering. Recent studies conducted by both the National Institute on Drug Abuse (2014) and the U.S. Department of Justice (2018) indicated that nearly 80% of criminogenic youth involved in the legal system reported some level of substance abuse within six months of their most recent arrest. Of that percentage, 25 to 55% meet the diagnostic criteria for a substance use disorder due to the frequency and longevity of their reported substance use (U.S. Department of Health and Human Services, 2014a). The manner in which substance use and criminal behaviors intertwine has been attributed to a number of influencers including increased impulsivity among offenders, decreased respect for social norms, and negative social networks influencing decision patterns (James, Stams, Asscher, deRoo, & der Laan, 2013). While these statistics indicate a deeper issue regarding the juveniles committing the criminal activities, only 15% of juvenile offenders around the country requiring clinical interventions for their substance addiction ever receive the therapy they need (Kaminer, 2013).

Delving into this issue in order to identify the deeper connections between criminogenic activities and recidivism among juvenile offenders was a major catalyst for

this current study. Prior research has shown a strong level of connectivity between traumatic event exposure and subsequent substance abuse, indicating that adverse childhood experiences can lay the foundation for diagnosable substance use disorders among juveniles (Hirschtritt, Dauria, Marshall, & Tolou-Shams, 2018). These adverse experiences also included living in a home where criminal behaviors were normalized, or witnessing authority figures, such as parents or guardians, engaging in criminal activity regularly (Dembo, Gulleldge, Robinson, & Winters, 2011). Overall, for juveniles who experience traumatic events and witness criminal behaviors in the home, their potential for both offending behaviors and substance addiction later in life is greatly increased (Craig, Intravia, Wolff, & Baglivio, 2019).

Due to these statistics, and the frequency in which juvenile offenders find themselves facing a substance use disorder, implementing outpatient programs within the legal system has grown in both popularity and frequency (James et al., 2013). By offering youth offenders the opportunity to address both their maladaptive behavioral patterns and substance addiction while remaining in the community, a number of positive goals are accomplished. The youth themselves are provided with clinical therapy aimed at increasing self-efficacy and improved social connectivity (Kretschmar et al., 2016). The parents, or guardians, of the youth are provided with additional support and resources in order to improve methods of communication within the home and increased oversight within the community (Dembo, Gulleldge, Robinson, & Winters, 2011). The legal system itself decreases the number of juveniles being placed into detention, which eases

the financial burden of prolonged probations stints and short-term juvenile incarceration (Sullivan et al., 2014).

Identifying the influencing factors of criminogenic behaviors for low level offenders can provide tremendous insight into the motivation and perpetuation of their negative decisions and substance addiction. For many youth, a combination of an unstable home environment, negative peer affiliations, normalized substance abuse within the home, and witnessed criminogenic behaviors are the foundation upon which their maladaptive traits are established (Collette et al., 2015). Exposure to these influencing factors at a young age set the stage for a number of issues including decreased respect for social norms, increased defiance toward authority figures, increased potential toward substance abuse, and increased potential toward legal issues (Gordon et al., 2004). While every youth will experience childhood and home life in a unique manner, providing outpatient treatment interventions aimed at addressing these issues has proven to be effective (Tripodi & Bender, 2011).

By implementing outpatient therapy instead of legal sanctions for low level juvenile offenders, research has shown the potential for various positive outcomes. These include decreasing habitual substance use among the juvenile participants, increasing positive interactions within the home, and improving positive social connectivity within the community (Dembo et al., 2016). The importance of this approach is that it focuses on wider scope of influencing factors impacting the criminogenic youths' behaviors and not simply on their legal issues. This allows the juvenile to receive comprehensive clinical treatment aimed at established long-term individual success through proven

effective therapeutic interventions (Belenko et al., 2017). Given the overwhelming number of juvenile offenders struggling with a diagnosable substance use disorder, this wide-ranging approach is a viable method of addressing their personal issues while also making efforts to decrease recidivism (Becan et al., 2015; Hodges et al., 2011).

According to the Justice Policy Institute (2014), a recent study of expenditures on confinement in 46 states found that detaining juvenile offenders can cost upward of \$400.00 per day. Over the course of three months, the cost's increased to over \$36,000 and for a full year of detention the tally stood at nearly \$150,000 for one juvenile offender. While these numbers may seem high, it is important to also note that the average juvenile placed into a detention facility does not even receive substantial therapeutic interventions while incarcerated (Denny & Connor, 2016). They are simply housed and monitored, confined to the facility in order to pay for their offenses but receiving no tools to better themselves for when they are inevitably released back into the community.

When calculating the total costs associated with the juvenile courts, and multiplying that number by the hundreds of thousands of youth involved in the legal system, the numbers continue to soar. Nearly \$6 billion are spent annually dealing with criminogenic juveniles, including detention placement and probationary services (Denny & Connor, 2016). As if these expenditures were not staggering enough, the impact that juvenile recidivism has on the adult court system, and the financial burden criminogenic youth contribute to the \$68 billion federal and state adult correctional budget is still unknown (Denny & Connor, 2016). What is known is that providing outpatient therapy

for a portion of this demographic costs considerably less and the long-term potential for sustained personal growth and positive social impact is significant (Bonnie, Johnson, Chemers, & Schuck, 2013).

The positive effects and monetary benefits of outpatient treatment on the individual youth participating and the surrounding communities can prove to be substantial. Recent studies focused on a variety of potential community-based interventions, calculating the long-term benefit of implementing those programs on criminogenic youth and the costs associated with the alternatives to incarceration (Bonnie et al., 2013). While a number of programs proved to be beneficial, the adolescent diversion program for low-risk offenders reinforced the applicability of this current study. The findings indicated that implementing an outpatient program of this nature could potentially save the participating communities over \$50,000 per youth over the course of their lifetime (Bonnie et al., 2013). These statistics were meticulously researched throughout the course of the study, factoring in a variety of costs typically associated with low-level offenders and the statistical likelihood of future legal issues. The researchers highlighted the potential for outpatient treatment interventions with a variety of criminogenic youth and stressed the fact that these types of programs hold the potential for remarkably large economic returns (Bonnie et al., 2013).

The reality of the situation is that a high percentage of juvenile offenders statistically struggle with substance use disorders (Craig et al., 2019; Denny & Connor, 2016; US Department of Justice, 2018). Focusing on alternatives to incarceration has shown to not only decrease the economic burden of dealing with these criminogenic

youth, but also positively impact their personal existence and familial interactions (Kretschmar et al., 2016; Sullivan et al., 2014). This has been achieved by not simply looking at the maladaptive behavioral patterns the juvenile offenders have displayed but also the influencing personal factors impacting those behavioral traits. Taking the time to individualize a youth who has come into contact with the legal system and better understand their motivations and personal hardships has enabled outpatient treatment programs to gain ground (Belenko, 2017).

Building upon those established concepts has been encouraged by a number of previous researchers in order to continue highlighting the positive impact and potential benefits of community-based interventions (Hodges et al., 2011; Korchmaros et al., 2017; van der Stouwe et al., 2017). By identifying how outpatient treatment impacts a participant's self-efficacy and overall therapeutic progress, this current study aims to reaffirm the potential of previous findings while addressing a specific gap in the literature. Particularly, to better understand the individual experiences of outpatient treatment on criminogenic youth struggling with a substance addiction and the manner in which their outpatient involvement impacted future recidivism. By furthering the knowledge regarding the individual experiences of participating youth offenders, the hope is two-fold. First, being able to identify the manner in which outpatient therapy rooted in Bandura's self-efficacy theory individually effects the participating criminogenic youth. Second, to encourage local municipalities to continue expanding their diversionary services in order to decrease both the juvenile recidivism rates and economic burden associated with criminogenic juveniles.

Being able to further the existing academic perspective of outpatient therapy as a means of diversion for low-level criminogenic youth has been encouraged within a number of past studies (Blair et al., 2016; Smith & Blackburn, 2011). Building upon this notion by incorporating the individual experiences of those youth as a means of better understanding the impact of outpatient therapy furthers the current literature and addresses an area lacking in viable content. The results of a study of this nature could accomplish multiple tasks including identifying whether or not outpatient treatment rooted in self-efficacy theory can effectively decrease recidivism among its participants. Also, it could further the existing perspective that diversion programs successfully decrease the legal costs associated with criminogenic juveniles by diverting them away from future offenses (Bonnie et al., 2013; Denny & Connor, 2016).

When looking at the connection between juvenile offending and diagnosable substance use disorders, increasing the academic vernacular concerning the individual experiences of those youth holds both individual and social implications (Kretschmar et al., 2016). The driving force behind Walden Universities' purpose and disseminated perspective is enacting positive social change. While this terminology can mean different things to different people and communities, the universal concept is to improve the areas in which people live. In the case of this study, working to advance the understanding of criminogenic youth participating in an outpatient treatment program strives to accomplish that objective. Academically, it addresses a gap in the literature while also focusing on a means of improving the lives of individual juvenile offenders involved in the legal system. It makes efforts to decrease recidivism among low-level and first-time offenders

by providing them therapeutic interventions that have impacted youth in a similar position. Socially, it builds upon prior research studies and continues to reinforce the notion that outpatient treatment interventions are fiscally more effective than detention and incarceration (Abdel-Salam & Gunter, 2014).

While the outcomes of a study of this nature are never guaranteed, implementing an objective approach and avoiding preconceived notions is essential to collecting viable content. Prior studies have effectively laid the groundwork upon which this current research study will be built. Understanding that outpatient treatment has proven monetarily and socially viable allows future research to take that concept and further its social applicability (van der Put, Creemers, & Hoeve, 2014). Building upon the concept of outpatient juvenile therapy as a means of decreasing recidivism has been encouraged by a number of previous studies due to its potential for enacting positive social change (Stein et al., 2015; Sullivan et al., 2014; Zarkin et al., 2015). The next step in this line of academic research is identifying how outpatient therapy rooted in self-efficacy theory individually impacts participating youth. Regardless of the outcomes, addressing this gap in the literature will work to further the existing knowledge in relation to criminogenic juveniles while also providing a voice to the individual youth participating in outpatient services.

The Applicability Of Phenomenology

The focus of this research study was to identify the individual experiences of criminogenic youth engaged in outpatient therapy rooted in Bandura's self-efficacy theory. Did their time in treatment impact future decision patterns? Did it work to

decrease recidivism rates among the low-level juvenile offenders participating in a community-based diversion program? How did they view their time in therapy? In order to best address these questions, the methodological approach implemented would have to identify the meaning and essence of the participants lived experiences. Phenomenology provided this opportunity by delving into the pure consciousness of those participating youth. This allowed the research to identify the nature of the phenomenon, outpatient treatment rooted in self-efficacy theory, in order to gather a deeper understanding of the individualized experiences (Patton, 2015).

However, with alternative research methodologies available at the onset of this study, efforts were made to identify whether phenomenology best suited the overall constructs associated with this analysis. Prior studies incorporating phenomenology were thoroughly researched in order to identify pertinent topics and similar demographical populations. The purpose was to ascertain what techniques were implemented during the data gathering process and how those techniques could apply to this current study. Additionally, being able to identify how effective prior studies considered a phenomenological approach in regard to identifying the essence of personal experience was essential to better understanding the nature of the criminogenic youth involved in this study (Patton, 2015).

Facchin and Margola (2016) provided a unique perspective regarding criminogenic populations struggling with substance addition. Their study implemented a phenomenological approach in order to study the way in which substance use and criminogenic behaviors interacted within an offender population. By conducting semi-

structured interviews with a small section of participants the researchers were able to identify specific precursors that impacted their participant's maladaptive behavioral patterns and coexisting substance addiction (Facchin & Margola, 2016). These included a disruptive childhood, multi-problematic families with deviant concepts regarding substance use, criminogenic familial behaviors and normalized substance use at a young age. These interrelated components were identified through a combination of rapport building and individual interviewing which enabled the participants to communicate openly in order to express their specific essence and experience (Patton, 2015).

Russell and Harvey (2016) provided additional insight on the applicability of phenomenology with regards to researching the individual experiences of criminogenic populations. In their study, the researchers implemented one-on-one interviewing sessions with each individual participant. The meetings focused on fifteen specific questions that had been formulated and refined prior to the session in order to provide the participants a similar platform on which to vocalize their individual experiences (Russell & Harvey, 2016). A subsequent data analysis was conducted using Interpretative Phenomenological Analysis which involved detailing the participant's perception of their world in order to better understand their personal experiences and perspectives. The study and approach reinforced the fact that implementing individual interviews during the data gathering process is an excellent method of capturing the essence of the populations involved in the analysis (Russell & Harvey, 2016).

Additional phenomenological studies focusing on maladaptive behavioral patterns and criminogenic trends highlighted the benefits of implementing a smaller population of

study (Coy, Lambert, & Miller, 2016; Makhubele, Malesa, & Shika, 2018) and incorporating semi-structured interviews (Burke & Dalmadge, 2016). These methodological approaches and data gathering techniques enabled the researchers to home in on the included participants in order to maximize the content of their individual responses. The purpose of phenomenology is to not simply collect data but to capture the essence of those involved in the study. The effective manner in which these structural elements have been successfully incorporated into prior research analyses have aided in establishing the foundation of this current study.

By integrating a smaller number of participants and establishing a semi-structured interview focused on the individual experiences of the participating juvenile offenders, this study aims to build upon the success achieved by past scholars (Coy et al., 2018; Facchin & Margola, 2016; Russell & Harvey, 2016). Those prior researchers were able to identify the benefits of incorporating phenomenological methodology to study various criminogenic elements and populations. Their integration of individual interviews allowed them to collect pertinent data in regard to their participants and capture the essence of their experiences throughout the study.

By incorporating this particular approach into this specific study, which focuses on the experiences of criminogenic youth, the aim is to identify the potential for positive social change within the juvenile court system (Krestchmar et al., 2016). Allowing the participating individuals to openly and honestly express themselves through semi-structured interviews achieves two specific goals. It provides those youth a voice to identify whether outpatient treatment had any significant impact on their personal life and

criminogenic decision patterns. It also increases the potential to continue expanding outpatient interventions for low-level offenders struggling with a diagnosable substance use disorder. In all, phenomenological methodology is capable of capturing the lived experiences of the participants while highlighting how the process of therapy impacted their individual lives. This allows for future research to build upon the collected data and continue to further the topic for potential studies (Mincey & Maldonado, 2011).

While phenomenology has shown to assimilate well into criminogenic studies focused on quality of content and smaller population samples, the importance of researcher objectivity cannot be overstated. When dealing with offender populations, regardless of the demographic, there is a danger of allowing personal feelings to cloud the data or impact decisions and perspectives. Some studies have highlighted this issue and encouraged researchers to identify methods of remaining objective through clinical consultation and peer reviews (Russel & Harvey, 2016). Others have specifically identified the difficulty of working with certain populations and encouraged researchers and clinicians to recuse themselves if they find the specific population or content too difficult to approach objectively (Jang, 2018).

Capturing the essence of the population's experiences is central to phenomenology, but if the research is tainted through personal bias, or influenced by preconceived perspectives, then the outcome of the research is untenable (DeHart & Moran, 2015). For this current study, the goal was to identify the experiences of criminogenic juveniles who participated in outpatient treatment rooted in Bandura's self-efficacy theory. Every step of this current research process remained objective and

unbiased in order to ensure the method and results were naturally occurring and organic. The importance of this approach was highlighted in prior research and reinforced through strict protocol and the establishment of ethical standards throughout the course of the studies (DeFosset et al., 2017; Kaminar, 2013; Mauro et al., 2017; Stein et al., 2015). Using these past researchers as guides, this study has built upon their foundational principals while expanding the available academic content by identifying an existing gap in the literature.

By implement the theoretical tenants of Albert Bandura's self-efficacy theory and identifying the manner in which juvenile offenders experienced outpatient treatment for their diagnosed substance use disorder, viable academic progress was made. While the benefits of outpatient treatment for criminogenic youth has been recognized in multiple prior studies, and the prevalence of substance addiction among offender populations well established, understanding the essence of the participants experiences was relatively unknown (Belenko et al., 2017; DeFosset et al., 2017; Kretschmar et al., 2016; Mauro et al., 2017; Taylor, 2016)). Therefore, building upon prior research and addressing this specific gap in the literature provided a unique opportunity. Furthering the available academic knowledge regarding juvenile offender treatment experiences allowed this population to vocalize how treatment impacted their individual lives. It also established a platform to encourage social change within the juvenile courts by continuing the discussion on the benefits of treatment over incarceration (Blair et al., 2016).

While the outcomes and results of these prior studies have been instrumental in constructing an academically viable and socially applicable study, understanding their

identified limitations have been as valuable. In particular, the large number of incorporated literary resources identified similar limitations that were highlighted within a majority of the included sources. These specific limitations focused on the influencing characteristics of the prior studies in order to either avoid them in the future or to encourage continued research within this area of study. All of these trending limitations were associated with the confines of the material and the restrictions of the methodologies implemented.

One of the most prevalent limitations identified within a large number of included literature resources was the quantity of included participants. While the benefits of outpatient treatment for criminogenic youth was identified in a majority of the academic sources, the need to replicate those findings within larger numbers of participant groups was highlighted (Belenko et al., 2017; Blair et al., 2016; Charles-Walsh et al., 2016; Kapoor et al., 2018; Sullivan et al., 2014). This would reinforce the applicability of the gathered research data and aid in validating the findings across wider geographical locations and populations demographics.

Since the foundational constructs of this current study focused on phenomenological methodology, including copious amounts of participants was simply not possible. However, by furthering the research into juvenile offenders participating in outpatient therapy, the process alone was building upon past research and expanding the available academic content (Kretschmar et al., 2016). This aided in addressing the limitations identified in prior studies by continuing to increase the number of participants engaged in a study of this nature while also expanding the geographical location of the

data being gathered. In addition, the viable gap in the literature identified at the onset of this study not only built upon prior research but expanded the scope and breadth of available content (Flacks, 2014).

This approach enabled the focus of this study to remain academically applicable while incorporating a research method that championed for social change. After all, what is the purpose of academic advancement if the communities in which we live cannot benefit from the information attained? Keeping the local communities at the forefront of this research study enabled the process to not simply address an academic shortcoming but also afforded increased motivation and purpose throughout the course of the study. Motivation, that the results could enact social change within the surrounding juvenile courts, potentially decreasing some financial burden through community-based treatment interventions. Purpose, that the identified experiences of the participating youth could reinforce the effectivity of outpatient therapy to decrease recidivism and establish the potential for individual success.

Summary and Conclusions

To research juvenile offenders participating in outpatient treatment for a diagnosed substance use disorder, their individual experiences must be understood. From the external influencing factors to the internal motivations that drive their behaviors, researching what initiates their pattern of criminogenic behaviors and substance abuse is the first step toward helping them achieve change. The literature review focused on specific areas influencing this demographic including the impact that outpatient treatment has on youth involved in the juvenile court and the prevalence of substance addiction

among juvenile offenders. The positive impact that community-based treatment has on youth who are involved in the legal system is undeniable (Kretschmar et al., 2016). It provides them the ability to continue in their normal social environment, allowing them to maintain academic and familial homeostasis while receiving qualified clinical interventions. Since the percentage of youth who are involved in the juvenile court and struggling with a diagnosable substance use disorder is so high, these types of treatment interventions are essential (US Department of Justice, 2018). They enable the courts to not simply impose sanctions on low-level offenders but treat them so that the root of their issues can be addressed.

Albert Bandura's self-efficacy theory has been foundational to this current study. Building upon his conceptual perspective of facilitating increased self-efficacy and overall engagement among criminogenic youth, this study has focused on the essence of the involved juveniles in order to better understand their individual experiences. This was achieved by documenting the individual point of view of the participants through one-on-one semi-structured interviews. The aim was to identify if their engagement in outpatient therapy rooted in Bandura's self-efficacy theory aided them in achieving decreased recidivism trends and improved substance abstinence. To discern the perspective of the contributors, Chapter 3: Research Methods presents the collection of data about those who participated in the semi-structured interview process. The corresponding qualitative analysis identified themes to better ascertain the manner in which outpatient treatment influenced the individual experiences of the involved juvenile offenders.

Chapter 3: Research Method

Within the juvenile criminal courts, efforts to identify viable methods of addressing criminogenic behaviors displayed by youth have grown in both scope and breadth over the past decade (DeFosset et al., 2017; Smith & Blackburn, 2011). Multiple studies have identified the effectivity of outpatient treatment and the positive impact it can have on both the involved individual and the criminal court system as a whole (Dembo et al., 2012; Kretschmar et al., 2016). The purpose of this study was to build upon that previous research in order to better understand the individual experiences of those criminogenic youth who participate in an outpatient treatment program. By focusing on the essence of their experiences and their subsequent recidivism rates, I sought to reinforce recent findings while addressing an identified gap in the literature.

This chapter identifies the focus of the study while also providing in-depth information regarding the study's research design and rationale. The role of the researcher is thoroughly described, along with the identified methodology and its applicability to the implemented research approach. The purpose is to give the reader a comprehensive look into the dynamics of this study and the methods chosen for the various steps in the study, from data collection to data presentation. Finally, this chapter addresses all issues of trustworthiness, including transferability, credibility, ethical concerns, institutional permission, and the protections provided to the participants. This exhaustive approach and aboveboard methodology are both purposeful and necessary in studies of this nature. While the collection of data and the furthering of academic inquiry are important, protecting those involved in research and ensuring that studies remain

ethically sound exceed all academic benefits in importance. Adhering to these standards allowed this study to capture the essence of the involved participants while furthering the current literature in an ethically sound manner.

Research Design and Rationale

The research questions for this study were as follows:

- RQ1. What role does the lived experience of criminogenic youth participating in outpatient therapy play in decreasing recidivism?
- RQ2. How do criminogenic juveniles use increased self-efficacy to address their maladaptive behavioral patterns and overall progress in therapy?

The central concepts and phenomena of the study included the individual experiences of low-level juvenile offenders who had participated in outpatient treatment as recommended by the juvenile criminal courts. The participants had been diagnosed with a substance use disorder that had impacted their involvement with the courts and established the viability of their involvement with outpatient therapy. The term *criminogenic youth* refers to juveniles who have become involved within the legal system due to maladaptive individual decision patterns and negative behavioral traits (Papp et al., 2016). Adverse decisions, behaviors, and/or traits have resulted in such youth being formally charged as first-time offenders, being given misdemeanor indictments, or both. Additionally, the concept of outpatient therapy refers to nonintensive outpatient treatment. This therapeutic approach incorporates a variety of clinical interventions for the involved youth, including individual counseling, community case management, substance abuse education, and urinalysis. This study focused on identifying the

individual experiences of criminogenic youth to ascertain whether their involvement in outpatient therapy aided in decreasing rates of recidivism.

Due to these areas of focus and the desire to capture the individual experiences of the involved criminogenic youth, a qualitative approach was implemented. The phenomena of outpatient therapy for criminogenic youth is complicated. It can vary from person to person, depending on the individual's level of engagement and personal history. By implementing a phenomenological research design, I sought to capture the participants' individual experience in order to identify both the clinical and the social applicability of outpatient therapy. That is to say, if the participants of this study found their involvement in outpatient therapy to be personally beneficial in decreasing criminogenic behaviors, the potential to expand the therapeutic approach could be justified.

Phenomenology focuses on gaining a deeper understanding of the meaning of everyday experiences (Patton, 2015). By incorporating a qualitative research approach rooted in phenomenology, I created a structure to gather individualized data through comprehensive interviewing and personalized feedback from the participating criminogenic youth. When one is attempting to verify or validate a clinical intervention provided within the constructs of the legal system, the viability of that intervention must be sound. The manner in which an individual's lived experience can provide detail to a subject, while also reinforcing the way in which the occurrence impacted their recidivism, is a powerful tool. Being able to build upon the literature encouraging the use of outpatient treatment by homing in on a specific theoretical construct such as Bandura's

self-efficacy theory was foundational to this study. A qualitative approach rooted in phenomenology provided the most appropriate vehicle to achieve that objective.

Role of Researcher

My role throughout the course of this study included interviewing the participating clientele, recording the responses they provided, and analyzing the subsequent data received from the interviews. Efforts were made to avoid research bias and preconceived notions by asking open-ended questions and providing the participants the ability to answer those questions in a safe and secure environment. In order to avoid unnecessary complications, I ensured that, as the interviewer, I had no existing relationships with the participants. Their identities were kept entirely confidential, and a neutral site was used to conduct all of the interviews. Additionally, the questions were phrased objectively in order to facilitate honest and open responses without making the participants feel as if their answers were being swayed or directed.

Methodology

For this study, low-level criminogenic youth who had been diagnosed with a substance use disorder were the primary demographic. These individuals had either been first-time offenders or offenders who had incurred misdemeanors or low-level felony charges within the juvenile court. Individuals' gender and socioeconomic status were nonfactors in the selection process. The requirements for eligibility included completing the outpatient therapy program successfully and receiving a successful discharge from the juvenile court. These two primary stipulations ensured that the participants had displayed

the ability to achieve improved behaviors and sustained sobriety when engaged in therapy while also avoiding criminogenic actions when properly motivated.

The participants included in this study consisted of youth over the age of 18 years who had been under the age of 18 when they actually completed outpatient therapy. Additionally, although the participating criminogenic youth had been involved in the legal system when they were engaged in outpatient treatment, they were uninvolved with the criminal courts when they participated in this study. The study included only those criminogenic youth who had successfully completed the program and were a year or more removed from this discharge date. This approach was implemented in order to avoid unnecessary setbacks during the review board stage and to ensure that the participants were legal adults when agreeing to partake in the interview process. IRB approval was received before beginning any data collection, approval # 01-16-20-0667240.

Sampling Strategy

Multiple facilities were included in the original process of identifying appropriate participants for this study. These facilities' clinical approaches to low-level criminogenic youth were discussed, along with their outpatient treatment practices and follow-up services. Eventually, only those facilities implementing a theoretical approach rooted in self-efficacy theory were included in order to meet the constructs of this study. Additionally, only those treatment programs implementing the highest standard of confidentiality and patient care were included in order to maximize the level of protection

provided to the participants while ensure that client wellbeing was the primary focus throughout the research phase.

The study population consisted of participants who had successfully completed outpatient therapy over a year ago. The study was created to identify the individual experiences of the participating criminogenic youth and how their engagement in outpatient treatment impacted recidivism rates. Criteria for inclusion included prior involvement with the juvenile criminal courts and a diagnosed substance use disorder. Those low-level criminogenic youth who had not successfully completed the program, or who had been diagnosed with a mental health disorder, were excluded from participation. This allowed the study to remain focused on the impact of outpatient therapy for criminogenic youth diagnosed with a substance use disorder, without distraction from additional factors.

Viable candidates selected from the participating treatment facilities were contacted via a paper mailing and email correspondence asking for self-selected volunteers. Inclusion in the study required a willingness to discuss time in treatment as well as subsequent behaviors following discharge from the outpatient program. I provided reassurances in my correspondence that participation in the study was completely voluntary, noting that if individuals agreed to participate, their identity and all answers would be kept secure and confidential. The purpose of the study was to capture the essence of the participants' time in outpatient therapy in order to identify how a treatment program rooted in self-efficacy theory impacts individual behaviors. Including

only those individuals who willingly chose to participate was essential in capturing objective and meaningful feedback regarding the process.

In order to maximize the quality of information included in this study, I planned for the participant pool to include eight to 10 individuals. Prior studies highlighted the importance of maintaining an optimal number of participants in qualitative research in order to avoid overcomplication and oversaturation (Coy et al., 2016; Sharpe, 2017). By streamlining the approach and including a lower number of participants, researchers can ensure that the collected data display greater breadth and scope, allowing the purpose of phenomenological methodology to shine through (Sharpe, 2017). The goal in this study was to collect rich and thick data through the incorporation of a saturation grid. This enabled the major topics of study to be identified and monitored throughout the different interviews conducted (Brod, Tesler, & Christenson, 2009). By asking the participants the same questions, I increased the potential to reach saturation and improved the quality of the content collected.

Instrumentation

The data-collection instrumentation for this study included historical data involving the participants' past legal charges, an interview protocol, and audio recording of face-to-face interviews with voluntary participants. I developed a semistructured interview protocol for the study in order to focus on pertinent topics relating to outpatient therapy while focusing on clients' individual experiences. The audio recording was implemented in order to ensure an accurate transcript for analysis.

The interview used in this qualitative study was formatted to elicit the individual experiences of the participants. The data collection strategy was based on Bandura's self-efficacy theory, identifying clients' level of participation during therapy and the manner in which their engagement throughout the therapeutic process aided in decreasing individual recidivism. The open-ended questions focused on the participants' expectations before beginning outpatient therapy, the manner in which their individual self-efficacy was impacted during treatment, and their overall experiences during outpatient therapy.

The historical data used for this study included direct court records and past treatment case files. The clinical applicability and ethical reliability of both sources ensured that the included information was pertinent and factually validated. These records enabled me to obtain in-depth information regarding the participants' behavioral patterns prior to engaging in outpatient therapy in order to weigh that information against the individual responses provided by the participants during the individual interviews. This combination of data collection strategies ensured that the full scope of behavioral patterns and individual experiences were incorporated into the current study, increasing the likelihood of comprehensive responses to the identified research questions.

Procedures for Recruitment, Participation, and Data Collection

Recruitment of the participants for this qualitative study was completed by communicating with viable outpatient treatment programs and identifying the most appropriate facility in relation to the constructs of this study. Once this was achieved, the program administrator was contacted and provided in-depth information regarding the

study. After the program administrator agreed to participate, I worked with the clinical staff to search through their client database in order to identify clientele who had been charged with low-level crimes at the onset of therapy, who were currently over the age of 18, and who had successfully completed treatment before being discharged from the program. In total, 25 past clients were selected who met the identified research criteria, and both a letter of contact and an email of contact were dispatched. The correspondence included details on the study as well as contact information for those willing to volunteer and schedule an interview time at an identified neutral location. The interview process consisted of an introduction, presentation and signing of the consent form, and a semistructured interview. Additionally, the interviews were recorded in order to be transcribed at a later date.

Although 25 correspondences were sent, only the first eight volunteers were incorporated into the study in order to achieve the optimal number of participants for this analysis. I conducted each interview myself in order to maintain a similar interview environment and tone across sessions. The participants were thanked at the end of every interview and provided a contact number to call if they had any subsequent questions or personal issues related to the interview process. No additional follow-up was incorporated into the study.

Data Analysis Plan

The goal of the study was to identify themes related to criminogenic youth participating in outpatient therapy that offered insight into decreased recidivism, increased self-efficacy, and improved individual behaviors. The data collection focused

primarily on historical data, including court records and treatment files, as well as a semistructured interview process. The interview itself focused on the client's behavioral patterns prior to beginning outpatient therapy and the individual experience associated with involvement in outpatient treatment. Each interview was recorded, transcribed, and entered into NVivo in order to identify themes and trends. The subsequent data were coded to reflect positive and negative experiences, increased or decreased self-efficacy, and increased or decreased recidivism.

Issues of Trustworthiness

Credibility

Strategies to establish appropriate credibility included prolonged contact with the participants in order to fully identify their lived experience throughout treatment and the subsequent impact that outpatient therapy had on their recidivism. Additionally, only participants from court-approved treatment programs were incorporated into the study, and the data collection proceeded until saturation in the analysis was identified.

Transferability

I collected data from criminogenic youth who had completed outpatient therapy for a diagnosed substance use disorder while involved with the juvenile court. One specific outpatient treatment facility within the Cleveland, Ohio region was incorporated into the study due to the theoretical approach that its clinical staff implemented with clientele. This approach, rooted in Bandura's self-efficacy theory, suggests that increasing individuals' level of self-efficacy positively impacts their personal perspective and overall self-worth. The study identified themes for outpatient therapy programs that

can improve the individual experiences of criminogenic juveniles among other outpatient treatment facilities. The race and gender profiles of participants were specifically kept ambiguous in order to increase potential validity across participant demographics. The findings were based solely on the individual experiences of participants within this geographical location.

Dependability

Steps were taken to improve the overall dependability of the collected data including audio recording the interviews and transcribing the collected responses thoroughly. This allowed the actual verbiage and individual experiences of the participants to impact the collected content. A notebook was implemented throughout the individual interviews to record the participant's personal experiences and any additional information offered during the interview sessions. The recorded data was uploaded to NVivo to provide a direct trail of the data analysis process from collection to thematic identification. The overall methodology was fully explained throughout the course of the study and documented as such that subsequent research can follow the same methodological process.

Confirmability

The analysis for this study included findings by previous authors and specific literary references that support both the collection and interpretation of the included data.

Ethical Procedures

This study incorporated participants who were juveniles when they engaged in and completed outpatient therapy, but who had become legal adults since their successful

discharge from the program. Agreements were made with the program administrator of the participating treatment facility to research their data base and identify potential participants for the study. From there, viable candidates were chosen and contacted through a letter mailing and email correspondence. The details of the study were thoroughly explained as well as the purpose of the study and confidentiality of their participation. The contacted individuals were asked to offer their time and were reassured that their participation in the study was strictly voluntary.

Once the volunteers agreed to participate, they were provided the address of a neutral location where the individual interviews would be conducted. When they arrived, they were greeted warmly and offered water in order to ease any existing tension and begin establishing rapport. The purpose of the study was again explained and their consent to participate and end the interview at any time was recorded for posterity. The interviews were conducted in similar fashion throughout each individual interaction and the participants were provided a safe and secure environment in which to describe their individual experiences in therapy and subsequent behaviors within the community. The questions implemented were thoughtfully constructed and every participant was encouraged to avoid self-disclosing criminal behavior during the interview. Each volunteer was provided a specific identification number in order to avoid recording any names and to ensure strict confidentiality. The raw data and subsequent analysis for this study was stored on my personal laptop and on a secure network.

Summary

Identifying the themes of criminogenic youth who had completed outpatient therapy to address their diagnosed substance use disorder was no simple task. From ensuring the confidentiality and safety of the participants to constructing pertinent interview protocol in order to elicit viable data, the steps taken to protect the volunteers and perpetuate the findings of the study were extensive. This was accomplished by implementing a qualitative approach that was fundamentally sound and proven. In addition, the incorporated participants and treatment facility were fully vetted and informed at the onset of the study in order to avoid unnecessary setbacks and ensure all involved parties were privy to all essential information prior to beginning the data collection process. Each step of this research study was thoughtfully identified and ethically driven, ensuring that the methodology was academically rooted, the participants were fully protected, and the collected data remained secure throughout the duration. The content of Chapter 4 will delve into the actual research process, describing all scope and detail of the incorporated study.

Chapter 4: Results

The purpose of this qualitative study was to identify individual experiences associated with outpatient treatment for criminogenic youth struggling with substance addiction. Identifying alternative intervention methods for this demographic is necessary in order to decrease recidivism rates and the overall costs associated with criminal detention and residential treatment facilities (Smith & Blackburn, 2011). By focusing on the level of self-efficacy throughout treatment for participating youth, I attempted to identify how personal motivation and individual participation affected clinical progress and recidivism trends among the participants.

Knowing that outpatient therapy positively influences a youth's ability to decrease substance use (Dembo et al., 2012) and that low-level criminogenic youth respond well to community-based treatment interventions (DeFosset et al., 2017), there remains a vital need for further academic research in this area. Missing from the current literature is an understanding of how criminogenic youth experience outpatient treatment. Such an understanding is key to identifying whether positive personal experiences throughout outpatient therapy affect participants' self-efficacy. The hope is that these positive experiences work to increase participants' self-efficacy, enabling them to avoid criminogenic behaviors and show decreased recidivism rates through improved personal perspective and decision making.

The U.S. Department of Justice (2018) reported that 77% of criminogenic youth identified a substance abuse issue within 6 months of their involvement with the criminal courts, and recent studies (DeFosset et al., 2017; Kretschmar et al., 2016) have shown the

potential impact of community-based treatment interventions to address this rising issue. One study identified the positive impact of increasing self-efficacy through treatment-based personal challenges as an effective manner of decreasing recidivism trends and academic regression among participating youth (Seroczynski, Evans, Jobst, Horvath, & Carozza, 2016). Another focused on community-based treatment interventions and how those efforts had positive impacts on the participating juveniles' ability to achieve sustained sobriety (Tripodi & Bender, 2011).

According to DeFosset et al. (2017), low-level criminogenic youth participating in a community-based outpatient treatment program tended to feel more involved and engaged in the therapeutic process, which aided in their level of participation in the program as well as their potential for long-term success within the community. In addition, studies by Kretschmar et al. (2016) and Dembo et al. (2012) indicated that community-based diversion programs can positively impact criminogenic youth's psychological functioning, substance abuse trends, and recidivism rates. Although the potential impact of outpatient therapy for criminogenic youth has been identified, the referenced studies suggested that "additional work is needed to understand if, how, and under what circumstances disparate perspectives may be combined to improve youth outcomes" (Defosset et al., 2017, p. 428).

In this current study, I explored the individual experiences of adults who had participated in outpatient treatment as juveniles and had successfully completed the program. The goal was to identify themes in order to answer the following research questions:

1. What is the lived experience of criminogenic youth participating in outpatient therapy?
2. How do criminogenic juveniles who successfully completed outpatient therapy describe how it affected their subsequent behaviors?

Treatment providers can use these themes to both design and taper outpatient treatment programs, increasing the probability of juvenile offenders successfully completing the program and avoiding recidivating in the future.

Research Setting

The structured interviews were conducted in the community at local public libraries that contained individual meeting rooms in order to provide a level of confidentiality and anonymity to the participants. All locations were free of distractions and isolated, allowing the questions to be asked in a relaxed environment and the participants to engage in a comfortable setting. Upon arrival, the individuals participating in the study were asked if they found the environment appropriate to conduct the interview, and all eight participants confirmed that they saw nothing wrong with the meeting rooms.

The primary challenge for data collection was scheduling the interview rooms in conjunction with the participants' availability. For the first interview (Interview 1), the participant had to reschedule twice because the times that the participant was available did not align with the interview room's availability. However, after some adjustment, I was able to schedule the interview and conduct it successfully. The subsequent interviews, Interviews 2–8, were all scheduled with no setbacks. The participants

identified the closest public library to their residence, and I subsequently reserved meeting rooms with no issues. Overall, I was able to schedule eight interviews, which was my identified data saturation point, and all interviews were conducted on time with no additional concerns.

Demographics

The study included eight randomly selected individuals from an outpatient treatment facility that was contracted with the juvenile court to provide clinical services to criminogenic youth struggling with a diagnosed substance use disorder. After the facility generated 20 potential participants with no specification of age, race, or gender, I contacted the individuals by both email and mailings to extend an invitation to volunteer. The goal was to schedule the first eight respondents in order to maintain the study's purposeful demographic neutrality and to expedite the completion of data collection.

By chance, the first five respondents were all male, the sixth and seventh were female, and the final volunteer was male. Of the six males who participated, four were Caucasian and two were African American. The two females who participated were both Caucasian. All participants were over the age of 18, had successfully completed outpatient treatment as a juvenile, and were no longer involved in the legal system. The study was purposefully designed to focus on the individual experiences of the participants regardless of race or gender in order to identify the effects that outpatient treatment had on each individual. This made it possible to gather pertinent data from a diverse group of participants.

Data Collection

I coordinated with the chosen treatment facility to contact the potential participants through their agency in order to abide by the recommended Institutional Review Board (IRB) protocol. After they dispatched email and paper mailings, the potential volunteers were instructed to contact my office phone to discuss their interest in the study as well as the most appropriate public library to meet and available time frames. Upon meeting with the participants, I initiated conversation by thanking them for their time and reexplaining the study's purpose. I then provided the volunteers with the consent form and explained how the audio recording process would be conducted throughout the interview. After the consent form was signed and I verified the individual's willingness to be audio recorded, I began the audio recording and conducted the semistructured interview.

The data collection proceeded as planned, with all eight participants following the identified structure of the preestablished interview questions as well as corresponding probing questions when appropriate. All participants engaged openly throughout the interview process, providing detailed descriptions of their time in treatment, their subsequent behaviors in the community, and the impact that outpatient treatment had on their past and current behavioral patterns. The recorded portion of the interviews lasted between 5.5 and 12 minutes and was recorded on a single device that was monitored and stored in a secure location throughout the entire data collection process. There were no variations in the data collection plan or unusual circumstances in any of the interviews.

All interviews were conducted as scheduled, and the participants displayed no problematic reactions or concerning behaviors.

Data Analysis

After each interview had been concluded and the participant had left the facility, I reviewed the audio recording. When all eight interviews had been completed, I uploaded all of the data to NVivo to have the interviews transcribed. From there, the coding was initiated by examining the survey responses and beginning to identify potential trends and terminology identified by the participants to describe their personal experiences in outpatient treatment. For the participants' time in treatment, the responses were coded as *positive* or *negative* in order to gauge their perspective. From there, the participants' subsequent behaviors following their successful discharge from outpatient treatment were coded as *decreased criminogenic behaviors*, *improved academic performance*, *sustained sobriety*, and *improved social interactions*. These coded units were identified by all eight respondents, who unanimously indicated a positive experience in outpatient treatment.

The open-ended questions included in the interview were categorized by the responses to each individual question as well as for overall themes identified by the participants. The coding for the research questions was as follows:

Research Question 1

What is the lived experience of criminogenic youth participating in outpatient therapy?

Subquestion 1: Tell me about your experience with outpatient substance abuse therapy. Can you describe your initial experience when treatment began

(probe for interpersonal influences)? Coding terms were as follows: (a) positive experience with outpatient treatment, (b) helped achieve sobriety, and (c) helped avoid additional legal charges. Examples included the following:

- “I think it was a good experience.”
- “I feel like it was good, it was very involved.”
- “It was actually helpful, I think. It helped me stop smoking.”
- “Outpatient substance abuse therapy was good, man. It was helpful.”
- “It’s good, uh it made me stop spending so much money on drugs and stuff and do better things for myself”

Subquestion 2: Was there a turning point in your life where sobriety became a priority? Coding terms were as follows: (a) treatment influenced. Examples included the following:

- “It just like emphasized, like, the pros of it and the cons of like being, like, an addict and just making bad choices and being in trouble with the law. It just showed me, cause with this came a lot of talks and opened my mind to a bunch of different things.”
- “Very much so. I think I had a good understanding of what sobriety was before, but I think I just was kind of reluctant to think that talking through everything would help as much as it has.”
- “It helped me to realize I’m not so dependent on marijuana.”

Subquestion 3: What have you found to be helpful throughout the process of outpatient therapy? Coding terms were as follows: (a) the therapeutic process, (b)

individual counseling, and (c) active treatment participation. Examples included the following:

- “Just being able to like get things off your chest, like talking and saying anything I want that I wouldn’t really say to anyone else.”
- “I’d say like a lot of having someone to talk to. And the drug screening helped too.”
- “Definitely just talking.”

Research Question 2

How do criminogenic juveniles who successfully completed outpatient therapy describe how it affected their subsequent behaviors?

Subquestion 1: How has your experience in outpatient therapy influenced the meaning of sobriety? Coding terms were as follows: (a) positive impact, (b) sustained sobriety, and (c) decreased recidivism. Examples included the following:

- “It’s helped me not to be rash I would say, and to think before you do something.”
- “Working with a therapist is a lot of help, to have someone to talk to and work through problems.”
- “Like, y’all keeping me from not smoking.”

Subquestion 2: Tell me about your experiences working with a therapist.

Coding terms were as follows: (a) positive experience and (b) lasting impact. Examples included the following:

- “It was amazing”

- “Working with people who listened the whole time helped me more than anything else.”
- “Motivation to get it done was real helpful.”
- “I felt the program was pretty beneficial for me and it helped me with my struggles.”

Subquestion 3: What has your experience with the legal system been? Coding terms were as follows: (a) decreased recidivism and (b) improved perspective of the court system. Examples included the following:

- “I know there are very big problems in the legal system and that my case was handled well.”
- “It helped me set a goal and stick to it.”
- “It helped me realize what I want to do with my life and help other people.”

After reviewing each individual question and the corresponding responses, I coded the interviews in their entirety as follows: (a) overall positive experience throughout outpatient therapy, (b) outpatient treatment aided in decreasing recidivism, (c) outpatient treatment aided in maintaining sobriety, and (d) participant experienced positive effects after treatment program was completed. These specific classifications were identified in all interviews and were verbally confirmed by the participants.

The theme for each participant was summarized as improved self-efficacy and decreased criminogenic behaviors. Improved self-efficacy was determined by participants who verbally confirmed that participation in outpatient treatment increased their ability to identify positive decision patterns and avoid maladaptive behaviors such as continued

substance use and conflict with family. The theme of decreased criminogenic behaviors was determined by participants who verbally confirmed that they had successfully avoided incurring additional legal charges since completing outpatient treatment and continued to use their time in therapy as a motivating factor to avoid criminogenic tendencies within the community.

Research Question 1

Qualitative: What is the lived experience of criminogenic youth participating in outpatient therapy?

Theme 1: Improved self-efficacy through active participation and engagement in outpatient treatment. The included participants consistently identified their involvement in outpatient treatment as instrumental in their ability to achieve sustained sobriety and avoid recidivistic behaviors.

Theme 2: Overall positive experience throughout outpatient therapy. This was identified by the consistent feedback from participants that the approach of including individuals in all facets of the treatment process, including assessment, treatment plan construction, personal goal identification, and identifying behavioral expectations, was instrumental to their experience.

Theme 3: Improved life trajectory due to involvement in outpatient treatment. Participants identified their involvement with outpatient treatment as a catalyst to them identifying problematic behavioral patterns and learning improved methods of avoiding negative decision patterns in the future.

Research Question 2

Qualitative: How do criminogenic juveniles who successfully completed outpatient therapy describe how it affected their subsequent behaviors?

Theme 1: Outpatient treatment aided in decreasing recidivism and improving personal decision patterns. This was identified by the participant responses that indicated their involvement in outpatient treatment aided in decreasing their criminogenic behavioral patterns. Those involved in the collection of research data displayed genuine enjoyment at being able to verbally express their positive experiences throughout the treatment process and the positive impact that outpatient treatment had on their subsequent lifestyle choices.

Theme 2: Involvement in outpatient treatment aided in decreasing substance use among participants. The consistent response from research volunteers indicated that involvement in outpatient treatment impacted their substance use in the community and aided in achieving initial and sustained sobriety. Most were confident that without involvement in a treatment program they would have struggled to have accomplished this task.

Theme 3: Outpatient treatment helped establish improved behavioral patterns after the program was completed. Participants expressed the fact that outpatient treatment helped them not only successfully get through their time in the legal system, but also provided them guidance in future decision making. This was achieved by learning how to identify positive personal decision and goals while in treatment and transitioning that mentality to future decision making throughout their lives.

Evidence of Trustworthiness

Credibility

None of the provided responses were suspected of not being credible or factual. As the interviews were conducted it was evident that the volunteers had similar experiences and themes during their time in outpatient treatment. This commonality indicated by the feelings and thoughts of the involved participants were indicative of data saturation being achieved.

Transferability

In accordance with the established data collection plan, participants were identified by a primary treatment provider to criminogenic juveniles within the area. The data received from the interviews with these individuals resulted in codes and themes that achieved an identifiable saturation point. Because the data was gathered from clientele who live in the area without any specific qualifications for participation the study results are transferable for alternative outpatient treatment programs in the Cleveland area working within a self-efficacy framed therapeutic approach. The manner in which the external environment influences local residents may not accurately represent other regions within the U.S. However, the themes developed from the gathered data can potentially provide valuable insight for outpatient treatment program administrators to explore further.

Dependability

The audio recording equipment used throughout the data collection process worked without incident. It successfully collected the responses of the participants and

provided quality vocal recordings of the conducted interview sessions. Nvivo was used to transcribe the recorded interviews, code the data and provide an audit trail of the research and information gathering process. Additionally, the methodology was followed such that another researcher can implement the same methodological approach.

Confirmability

The analysis and data gathering process included references to established literature and academic findings by other authors and theorists that support the interpretation of the data.

Study Results

Research Question 1

Qualitative: What is the lived experience of criminogenic youth participating in outpatient therapy?

Finding 1: Outpatient treatment focused on improved self-efficacy had a positive impact on the participating youth. Prior studies have indicated that outpatient treatment for criminogenic youth is beneficial on multiple levels. It has been shown to both decrease recidivism rates among those who engage in the therapeutic intervention as well as decrease costs incurred by the juvenile court (Bonnie et al., 2013). This has been attributed to the fact that outpatient treatment enables criminogenic juveniles to not simply receive a sanction for their maladaptive behavioral patterns but instead engage in a clinical environment that teaches improved methods of behavioral management (Begun et al., 2016). This study was able to build upon those findings and provide greater insight

into not only the impact of outpatient treatment, but the manner in which a specific theoretical approach can affect the criminogenic juvenile involved.

The collected study data indicated that each participant experienced a positive interaction with their treatment provider and a level of engagement attributed to their active involvement in the entire treatment process. The fact that they were empowered throughout the course of outpatient therapy to identify personal areas they wanted to improve enabled them to feel invested in the process. Participant # 1 stated, “I think it (i.e. participation in outpatient therapy) allowed me sober up and clear my mind” indicating that participation in the program not only aided in establishing a pattern of sustained sobriety but also maintaining that sobriety long term. Participant # 7 echoed this sentiment stating, “Having someone to talk to and listen and like get advice really helped me I think.”

Additionally, participants identified that their experience with the legal system prior to beginning outpatient therapy was difficult at times due to a lack of guidance and direction. However, the introduction of outpatient therapy enabled them to better navigate the legal system and also avoid subsequent criminogenic behavioral patterns. This was attributed to the implementation of an individual therapist who worked directly with the juvenile, providing consistent feedback and reinforcing positive behavioral patterns thereby increasing the participant’s level of self-efficacy.

Finding 2: Participation in outpatient therapy seemed to have minimal impact on the participants’ academic progress. Prior studies have shown that engaging in an outpatient treatment program can positively impact a juvenile’s academic

performance and school attendance (Burke & Dalmadge, 2016). The data gathered throughout this study indicated that the participants interviewed experienced minimal academic impact during their time in outpatient therapy. When asked if engagement in outpatient therapy impacted their school performance participant #6 stated, “to be honest, I’ve always been on top of school” and participant #2 stated, “maybe a little” indicating that their academic standing was minimally impacted by outpatient therapy.

While this varied from previous research the fact that every interviewed participant was either a first-time or low-level offender may have played a role in their responses regarding outpatient treatments impact on their school performance. And while there was no definitive information gathered that displayed a positive influence on academic performance, the participants did acknowledge that outpatient treatment did not have a negative impact on their academic standing.

Finding 3: Social support from family and friends seemed to positively impact the participants’ overall experience in outpatient therapy. Another common theme identified throughout the interview and data collection process was the positive impact that supportive family and friends played on the overall experience of the respondents. Every participant confirmed that the support of their significant others played a tremendous role in their ability to complete outpatient treatment and achieve sustained sobriety throughout the course of the program. They identified supportive family members as a intricate component to their own personal success and the presence of a supportive peer network as helpful in avoiding instances of relapse.

These findings fall in line with previous research findings that indicated a strong social support network can both inspire a youth during outpatient treatment and expand their level of accountability exponentially, increasing the likelihood of sustained success (Davis et al., 2016). While this was hypothesized before the research was conducted, being able to validate the positive impact that supportive loved ones have on a criminogenic juvenile's personal success reinforced the importance of that specific component in the overall therapeutic process.

Research Question 2

Qualitative: How do criminogenic juveniles who successfully completed outpatient therapy describe how it affected their subsequent behaviors?

Finding 1: Participation in outpatient therapy impacted future decision patterns positively. Previous studies identified the positive role that outpatient treatment has had on criminogenic juveniles including decreasing recidivism rates, improving personal decision patterns, decreasing court costs, and helping youth achieve and maintain a level of sobriety (Belenko et al., 2017; Blair et al., 2016; Charles-Walsh et al., 2016; Kapoor et al., 2018; Sullivan et al., 2014). The data collected during this study reinforced those findings and highlighted the long-term positive impact that outpatient treatment can have on criminogenic juveniles. All of the individuals interviewed verbally confirmed that they had avoided incurring any additional legal charges following their successful discharge from outpatient therapy. When asked how outpatient therapy impacted his subsequent decision patterns participant #7 stated, "Always make the right decisions and live the life your parents would want you to." Reinforcing this perspective,

participant #1 stated, “It helped me stop smoking, making sure I’m straight with it and that I’m taking care of my things. It’s really been a growing experience for me.”

The participants displayed optimism and hopefulness when discussing their life after outpatient therapy, identifying their participation as a positive experience and recommending that other criminogenic juveniles would benefit from the same therapeutic intervention. Participant #1 finished the interview by stating, “I have friends that have gone to jail and are still in jail and I feel that if they could have been given this opportunity instead of that, their life could have gone in a very different direction then it did.”

Finding 2: Improved self-efficacy aided in creating an increased level of positive decision making within all of the interviewed participants. All of the included participants identified the positive impact outpatient therapy rooted in self-efficacy theory had on their lives. Having the ability to actively participate in the creation of behavioral goals enabled the individuals to become invested in the therapeutic process and remain engaged throughout its entirety. When asked how participation in outpatient therapy impacted future decision patterns participant #5 stated, “It helped me, I just need to better myself because I have a lot going on, I have children on the way, so I just gotta stop with the little stuff and get to the big stuff.” When asked the same question participant #3 stated, “It’s actually helped me become a better person.”

These sentiments, and the responses of the other participants highlighted the positive impact that participation in outpatient therapy focused on increasing self-efficacy can have on criminogenic juveniles. While previous research has shown that outpatient

therapy can improve decision patterns and social interactions, they rarely referenced the theoretical approach implemented (Brod et al., 2009). This study furthered those findings by identifying a specific therapeutic approach that not only reinforces previous research but also highlights the individual impact this theoretical method has on participating youth.

Summary

The structured interviews were conducted within the community at a public library chosen by the participant. They were recorded and later transcribed in order to analyze the data and identify themes associated with individual participation in outpatient therapy. The subsequent data was categorized and coded in order to identify themes among the responses and correlations among the participant perspectives. The resulting themes were used to create findings for each of the research questions in order to identify the experiences associated with each participant's time in outpatient therapy.

Research question 1 sought to understand the lived experience of criminogenic youth participating in outpatient therapy. The identified themes helped to provide insight into how youth individually process their time in outpatient treatment in order to continue tailoring services to better meet the needs of those being served. The findings consisted of (a) outpatient treatment focused on improved self-efficacy had a positive impact on the participating youth, (b) participation in outpatient therapy seemed to have minimal impact on the participants academic progress, and (c) social support from family and friends seemed to positively impact the participants overall experience in outpatient therapy.

Research question 2 sought to identify how successful completion of outpatient treatment impacted the future decision patterns of criminogenic juveniles. The subsequent findings included: (a) participation in outpatient therapy impacted future decision patterns positively and (b) Improved self-efficacy aided in creating an increased level of positive decision making within all of the interviewed participants. All of the findings listed are based on solely on the responses provided by the participants to the structured interview questions. These findings provide valuable insight into the individual experiences associated with outpatient therapy participation and the impact that treatment rooted in self-efficacy theory can have on criminogenic juveniles. Chapter 5 builds upon these findings and provides specific actions that can be implemented in order continue adjusting outpatient therapy programs to better meet the needs of the juvenile participants.

Chapter 5: Discussion, Conclusions, and Recommendations

Taking the necessary steps to decrease recidivism among criminogenic juveniles is a goal shared by every facet of society. Finding cost-effective methods of addressing the maladaptive behaviors displayed by low-level juvenile offenders has become a primary focus shared by all involved parties, from those in the legal system to clinical treatment providers (Kretschmar et al., 2016). The fact that a majority of first-time and low-level criminogenic juveniles reported consistent substance abuse issues prior to becoming involved in the juvenile justice system highlights the importance of clinical interventions as opposed to simple legal sanctions (Tripodi & Bender, 2011). In addition, previous studies have highlighted the positive impact that outpatient therapy has on a youth's ability to effectively decrease substance use within the community (Dembo et al., 2012) and have indicated that low-level criminogenic youth respond well to outpatient treatment interventions (DeFosset et al., 2017).

In the present study, I aimed to build upon the existing literature by addressing an identified gap concerning the individual experiences of criminogenic youth who successfully completed outpatient therapy. Data were gathered from volunteers who had previously been through the juvenile justice system as first-time or low-level offenders. This approach enabled the research to focus on the individual experiences of criminogenic juveniles in a self-efficacy-rooted qualitative study. The purpose of the study was to identify specific themes associated with the individual experiences of low-level offenders in order to continue improving the clinical interventions provided to criminogenic youth while also decreasing recidivism rates.

This qualitative study included data collected from participants who had previously completed outpatient therapy while involved with the juvenile court. The findings for Research Question 1 included the following:

1. Outpatient treatment focused on improved self-efficacy had a positive impact on the participating youth. The study participants universally acknowledged the positive impact that outpatient treatment had on their behavioral patterns and substance abuse issues.
2. Participation in outpatient therapy seemed to have minimal impact on the participants' academic progress: While most of the participants reported positive academic performance throughout their time in outpatient treatment, they did not identify the therapeutic intervention as the reason for their academic success.
3. Social support from family and friends seemed to positively impact the participants' overall experience in outpatient therapy: The study participants identified positive social interactions with their family members and friends as an influencing factor in successfully completing outpatient treatment. By having people in their lives who increased accountability and provided consistent support and encouragement, the study participants identified these positive social supports as a key factor in their ability to achieve sobriety, sustain their sobriety, and complete the outpatient treatment program.

The following findings were used to answer Research Question 2:

1. Participation in outpatient therapy impacted future decision patterns positively. The individuals participating in the study identified their involvement in outpatient treatment as an influencing factor in subsequent decision making. The skills they attained enabled them to avoid recidivating while also improving their individual responses to personal stressors. Multiple participants identified the individual counseling aspect of therapy as an instrumental factor while others identified the ability to engage in a therapeutic environment as the primary reason for their improved decision making.
2. Improved self-efficacy aided in creating an increased level of positive decision making within all of the interviewed participants: The individuals engaging in the study expressed their desire for other criminogenic juveniles to have the opportunity to participate in outpatient treatment. They identified the positive experience they had while in treatment and the therapeutic approach of actively participating in all facets of the therapeutic process as a key factor in their sustained success. Being able to provide real-time feedback in the construction of personalized goals enabled the participants to feel engaged in the therapeutic process. Additionally, it provided them with foundational knowledge to aid in future decision patterns and methods to avoid recidivistic behavioral patterns.

These findings may be able to provide community-based treatment providers and juvenile court staff pertinent information to develop and modify effective therapeutic approaches that address the needs of criminogenic youth within the community.

Interpretation of Findings

In the literature review, I summarized existing research that identified the impact that outpatient treatment can have on criminogenic youth, the positive correlation between youth struggling with substance addiction and outpatient therapy, and the positive social impact that community-based treatment interventions can have on both the surrounding community and the families involved. For the purposes of this study, I attempted to build upon the existing literature by working to identify individual experiences of criminogenic youth who successfully completed outpatient treatment rooted in Bandura's self-efficacy theory. I encountered no issues finding participants who had previously completed outpatient therapy as juveniles and who were currently adults completely removed from the legal system. The study participants reported their individual experiences throughout the process of outpatient treatment, including how their involvement affected their personal decision patterns, social interactions, familial interactions, and subsequent behavioral patterns following their successful discharge.

The existing literature indicated that criminogenic youth who participate in outpatient therapy generally experience positive outcomes in the community, including decreased recidivism rates and decreased substance use issues. The participants involved in this research study echoed that experience, confirming that their participation in outpatient treatment helped them avoid recidivating while also aiding them in achieving

sustained sobriety within the community. Additionally, they reported that engaging in a treatment program that increased self-efficacy and personal involvement helped maintain their commitment to the program and establish a positive relationship with their treatment provider. This information and the experiences expressed by the participants were consistent with the current literature.

The purpose of outpatient treatment for criminogenic youth is to provide clinical interventions and skill building to juveniles who are struggling in the community. This allows those youth to remain engaged in their daily social environment while learning therapeutic techniques that can help them avoid recidivating. Allowing low-level juvenile offenders to remain in the community, as opposed to being placed into detention facilities or receiving strict legal sanctions for their offenses, enables them to learn from their experience. This concept rang true with all of the study participants, who universally agreed that their participation in outpatient treatment enabled them to successfully meet the expectations of the courts, achieve sustained sobriety, and improve future decision patterns. Additionally, the study participants verbally confirmed that engaging in outpatient treatment rooted on Bandura's self-efficacy theory allowed them to feel personally involved throughout the entire therapeutic process. This helped them better establish their clinical relationship with their treatment provider and encouraged them to follow through with behavioral expectations and personal goals.

Consistent with the literature review, the positive impact that outpatient treatment can have on criminogenic youth who are involved in the legal system and struggling with a substance abuse issue is identifiable. The individual participants all reported positive

experiences throughout their time in outpatient treatment and identified their involvement in the program as instrumental to their achieved sobriety and improved decision making. Those interviewed had succeeded in avoiding further legal issues and displayed appreciation for being provided the opportunity to participate in a diversion program while involved with the juvenile court. This reinforced the existing literature and emphasized the potential impact that outpatient treatment rooted in self-efficacy theory can have on criminogenic youth attempting to correct their course and achieve a better life.

Limitations of the Study

In analyzing the data provided by the study participants, I identified themes in relation to their individual experiences during the course of outpatient therapy and the manner in which their involvement impacted future decision patterns. The collected data provided information only about the sample population, which was a fraction of the actual population receiving outpatient treatment within the community. The lack of a representative sample limits the findings and information collected to the feelings and thoughts of the study participants. Due to the sample size and limitations of scope, the findings were not directly generalizable to any specific population.

The coding and convergence of the collected data indicated six themes that provided insight into the two research questions posed at the onset of the study. The responses to the survey questions were generally succinct and applicable to the study's purpose. The survey responses were categorized in order to identify similarities among the research participants' responses, and none of the information was excluded from the

analysis. All data were collected from an outpatient treatment program located in the Cleveland, OH region; similar studies in other geographical areas might produce alternative findings.

Recommendations

Implementing a wider scope of outpatient treatment interventions rooted in self-efficacy theory is worth further investigation. The themes identified through the collected data supported the theory that outpatient treatment for low-level criminogenic youth would have a beneficial impact on their personal decision patterns, recidivism rates, and sobriety. Implementing additional studies that focus on the impact of outpatient treatment for low-level and first-time juvenile offenders would enable these findings to be applied with a wider scope, increasing the potential to identify applicability to a wider population. Future studies could include a larger sample population, a specific gender focus, and socioeconomic impact, which would continue to expand the results of this study and contribute to areas in which the current literature is lacking. This proposed approach, in expanding upon the current study, could develop and identify additional themes that reflect the individual experiences of criminogenic juveniles within varying social settings and personal influences.

These alternative approaches and variations to the current study might also expand the findings' applicability to differing court systems. By incorporating specific demographic factors in participant selection, future qualitative studies could increasingly specify their findings and potentially identify additional outpatient treatment components that specifically impact specified populations of criminogenic youth. Further, future

studies on individual experiences of outpatient treatment for low-level criminogenic youth could focus on alternative theoretical approaches. This would enable the expansion of critical findings in relation to how outpatient treatment participants progress through therapy and identify which approaches prove most effective in the long term.

Implications

Participation in outpatient treatment has been shown to positively impact recidivism rates among criminogenic youth within a variety of communities. The present study built upon these previous findings and focused on the individual experiences of juvenile offenders who engage in an outpatient treatment rooted in Bandura's self-efficacy theory. The findings indicated that their participation in the program not only helped them avoid future criminogenic activities, but also improved their ability to maintain their sobriety after the program was successfully completed. This insight may impact the surrounding communities by looking into the potential benefits of how individually motivated criminogenic youth can decrease recidivism rates and substance use through comprehensive clinical interventions. While outpatient treatment has been shown to accomplish this task, taking the available knowledge a step further in identifying a theoretical construct that juvenile offenders embrace has the potential to positively impact an even greater number of participants.

Analyzing the individual responses of the study's participants highlighted the fact that outpatient treatment rooted on self-efficacy theory did more than simply provide an opportunity for the involved youth to avoid legal sanctions. It enabled them to interact in a clinical manner that aided in decreasing criminogenic decision patterns while also

encouraging improved methods of communication and stress management. Their individual responses indicated that the therapeutic interventions and clinical approach implemented throughout outpatient treatment impacted their decision making and behavioral patterns after they completed the program. While the sample size was minimal, the results may be beneficial for future treatment programs within the region. This study may provides such programs with solid research data that can be used to guide potential treatment interventions in order to maximize positive outcomes for the involved juvenile offenders.

While there were positive reactions displayed by the research participants in reaction to their time in therapy, it is important to note that scholastic performance and familial interactions were seemingly unchanged by the clinical interventions introduced during outpatient treatment. This is not to say that participants' time in outpatient treatment did not positively impact their academic standing, only that the participants did not acknowledge outpatient therapy as a meaningful factor in their overall academic success. Future studies could delve deeper into this aspect of outpatient treatment, placing greater focus on both familial interactions and academic performance before treatment was initiated, throughout the course of therapy, and at the conclusion of the program. This would provide an alternative approach to the current study while enabling future researchers the ability to continue expanding on the available literature.

The primary factors that can be translated onto real-world scenarios and current outpatient treatment programs focus on the positive impact that outpatient therapy has on criminogenic youth as well as the beneficial manner in which it address substance abuse

issues among this specific population (Kretschmar et al., 2016; Mauro et al., 2017).

Providing clinical interventions to low-level and first-time offenders not only addresses their maladaptive behavioral patterns in a more effective manner than simple legal sanctions, but also provides the participants with essential skills to aid them in the future (DeFosset et al., 2017; Dembo et al., 2012; Kretschmar et al., 2016). The results of this study reinforce those findings while also expanding on the literature, identifying the positive impact that outpatient treatment rooted in self-efficacy theory can have on this specific population. This not only positively impacts the criminogenic juveniles participating in the program, but also has the ability to positively impact the surrounding communities, creating the potential for significant positive social change.

Conclusion

Decreasing recidivism within the juvenile justice system is a goal that everyone in society supports (Tripodi & Bender, 2011). By providing viable therapeutic interventions to low-level and first-time offenders, steps are being taken to not only decrease the number of youth who reoffend, but also provide at-risk juveniles with improved social skills (DeFosset et al. 2017). This approach enables the juvenile justice system to implement alternatives to incarceration and detention while simultaneously decreasing the monetary burden associated with involvement in the legal system (Smith & Blackburn, 2011).

The findings from this study reinforce the positive impact that outpatient treatment has on juvenile participants while expanding on the individual perspectives associated with a specific theatrical approach being implemented throughout the process.

Outpatient treatment rooted in Bandura's self-efficacy theory not only positively impacted the participants involved in this study, but also increased their engagement in the program and aided them in making improved decisions in the future. This resulted in decreased recidivism rates among the participants as well as sustained sobriety after their involvement in outpatient treatment was complete. Expanding this clinical approach throughout the region could potentially have the same impact on an increasingly larger demographic of criminogenic youth. The results could include decreased recidivism rates among a larger percentage of low-level and first-time offenders, positively impacting the surrounding communities while significantly reducing the monetary burden associated with involvement in the legal system.

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Appendix A: Structured Interview Outline

Interview Outline

- Neutral initial question: Help me to understand how you became involved in the legal system?
- Tell me about your experience with outpatient substance abuse therapy? Can you describe your initial experience when treatment began (probe for interpersonal influences)?
- What were the circumstances leading to your recent arrest? Can you describe your initial experiences with the legal system (probe for interpersonal influences)?
- Was there a time in your life where substance use became out of control (Probe for interpersonal influences on substance use)?
- Was there a turning point in your life where sobriety became a priority? How has your experience in outpatient therapy influenced the meaning of sobriety (probe for intrapersonal changes in thoughts and feelings related to substance use since starting treatment)?
- Tell me about the role of your peers in your recovery? What role has your family played in your sobriety (probe for progress or regression in both social supports)?
- How relevant has academics/school been for you? What was the role of school prior to coming to treatment? How has that changed?
- Tell me about your experiences with your therapist?

- What have you found to be helpful throughout the process of outpatient therapy?
What has your experience with the legal system been (probe for current perspectives on criminogenic behaviors)?
- Is there anything else you'd like to add at this time?

Concluding statement:

Thank you for your time and participation. The purpose of this study is to further the available information regarding outpatient therapy in order to improve its application. Your willingness to participate in this study has been instrumental in furthering the research of outpatient treatment for youth in the juvenile court system and will go to better assist juveniles struggling with substance abuse issues.